



**Lake County, Florida
Department of Growth Management
Planning & Community Design**

**Application for Timeliness Analysis
Suburban / Transitional Future Land Use Designations**

Date: _____

Name of Property Owner: _____

Phone: _____

Address: _____

Name of Applicant: _____

Phone: _____

Address: _____

Legal Description:

Alternate Key # _____ **Sec.** _____ **Twn.** _____ **Rng.** _____

Size of Parcel in Acres and Fractions thereof:

Uplands _____ **Wetland** _____ **Open Water** _____ **Total** _____

Future Land Use: Suburban _____ **Transitional** _____

Results:

% of "existing developed": _____% **> 99.99 acres** _____ **< 99.99 acres** _____

Roads _____ **Commercial / Industrial** _____ **Lots 1 ac. Or smaller** _____

Subdivisions 1du/ac or greater 50% built _____ **Developed Parks** _____ **Other** _____

Attach proof of Fee simple Title Holder(s) of the property.
Attach a copy of the Recorded Deed & Property Record card.

OWNERS' AFFIDAVIT

STATE OF FLORIDA)

COUNTY OF LAKE)

BEFORE ME, the undersigned authority personally appeared _____,
 who being by me first duly sworn on oath, deposed of and says:

1. That he/she is the fee-simple owner of the property legally described in this application.
2. That they desire a Timeliness Analysis, for the property legally described in this Application.
3. That he/she has appointed _____ to act as Agent in his/her behalf to accomplish the above. The Owner is also required to complete the APPLICANT'S AFFIDAVIT of this Application if NO AGENT is appointed to act in his stead.

 AFFIANT (OWNER'S SIGNATURE)

STATE OF FLORIDA
COUNTY OF LAKE

The foregoing instrument was acknowledged before me this ____ day of _____,
 20____ by _____, who is personally known to me or who
 had produced _____ as identification and who did ____ or did
 not ____ take an oath.

 Notary Public (Signature)

 Print or Type Notary Name

NOTE:

All Applications shall be signed by the Owner(s) of the Property, or some person duly authorized by the Owner to sign. The authority authorizing such person other than the Owner to sign MUST be attached.

APPLICANT'S AFFIDAVIT

STATE OF FLORIDA)

COUNTY OF LAKE)

BEFORE me the undersigned Authority Personally Appeared _____,
who being by me first duly sworn on oath, deposes and says:

1. That he/she Affirms and Certifies that he/she understands and will comply with all Ordinances, Regulations, and Provisions of Lake County, Florida, and that all statements and diagrams submitted herewith are True and Accurate to the best of their knowledge and belief, and further, that this Application and Attachments shall become part of the Official Records of Lake County, Florida, and are Not Returnable.
2. That he/she desires a Timeliness Analysis for the property Legally Described in this Application.
3. That the submittal requirements for the Application have been completed and attached hereto as part of that Application.

Affiant (APPLICANT's SIGNATURE)

STATE OF FLORIDA **COUNTY OF LAKE**

The foregoing instrument was acknowledged before me this ____ day of _____,
20____ by _____, who is personally known to me or who
had produced _____ as identification who did ___ or did not ___
take an oath.

Notary Public (Signature)

Print or Type Notary Name